

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

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PROPERTY TAX PORTAL LACOUNTYPROPERTYTAX.COM

November 09, 2016

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

21 November 9, 2016

LORI GLASGOW EXECUTIVE OFFICER

REQUEST TO ACCEPT COMPROMISE OFFERS OF SETTLEMENT (ALL SUPERVISORIAL DISTRICTS AFFECTED) (3 VOTES)

SUBJECT

This is to request Board approval to accept compromise offers of settlement for patients who were injured in a third party compensatory accident and received medical care at a County facility. Treasurer and Tax Collector (TTC) staff entered into negotiations with the liable parties and reached the following settlement agreements, which are beyond the TTC's authority.

IT IS RECOMMENDED THAT THE BOARD:

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the following compromise offers of settlement:

- 1. Account Number 12976574 in the amount of \$8,330.00
- 2. Account Number 13068167 in the amount of \$6,000.00
- 3. Account Number 12868706 in the amount of \$17,844.00
- 4. Account Number 12992393 in the amount of \$8,110.00
- 5. Account Number 12849789 in the amount of \$18,050.57

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

These compromise offers of settlement are recommended because the subject patients are unable to pay the full amount of charges and the compromise offers represent the maximum amount the TTC was able to negotiate or was offered under the legal settlement requirements involved in these

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cases.

The best interest of the County would be served by authorizing acceptance of these compromise offers of settlement, as they will ensure maximum possible collection on these accounts.

Implementation of Strategic Plan Goals

The recommended action supports Goal 1, Operational Effectiveness/Fiscal Sustainability, of the County's Strategic Plan by collecting funds owed to the County.

Strategic Asset Management Principles Compliance

Not Applicable.

FISCAL IMPACT/FINANCING

Authorizing acceptance of these compromise offers of settlement will enable the County to maximize collections on these accounts.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Under County Code Title 2, Division 3, Chapter 2.52.040 (L), the TTC has the authority to reduce patient account liabilities by the greater of: (i) \$15,000, or (ii) \$75,000 or 50 percent of the account balance, whichever is less. Any reduction exceeding this authority requires Board approval. These account reductions exceed this authority.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Authorizing acceptance of these compromise offers of settlement will result in net revenues for the County, which will in turn assist the County in meeting its fiscal responsibilities.

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Respectfully submitted,

Joseph Kelly

Treasurer and Tax Collector

JK:KK:KG:BR:ms

Enclosures

c: Chief Executive Officer Executive Officer, Board of Supervisors

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR TRANSMITTAL 140A

		Account	
Amount of Aid	\$43,939.00	Number	12976574
Amount Paid	0.00	Name	Adult Female
		Service	
Balance Due	\$43,939.00	Date	07/05/14 - 07/23/14
Compromise			
Amount Offered	8,330.00	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$35,609.00	Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus automobile accident. She was treated at LAC USC Medical Center at a cost of \$43,939.00. The client did not have Medi-Cal or private insurance to cover these services.

The attorney has settled the case for the amount of \$25,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 8,333.00	\$ 8,333.00	33.33%
Attorney Costs	10.00	10.00	0.04%
County of Los Angeles	43,939.00	8,330.00	33.32%
Net to Client	N/A	8,327.00	33.31%
Total	\$52,282.00	\$25,000.00	100.00%

Our financial investigation reveals that the client is employed and supports herself. The client has no other source of income or tangible assets.

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR TRANSMITTAL NO. 140B

Assessment of Airl	#20.407.00	Account	40000407
Amount of Aid	\$39,167.00	Number	13068167
Amount Paid	0.00	Name	Adult Male
		Service	
Balance Due	\$39,167.00	Date	08/17/13 – 10/24/13
Compromise			
Amount Offered	6,000.00	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$33,167.00	Туре	Inpatient /Outpatient

JUSTIFICATION

The client was involved in an automobile versus motorcycle accident. He was treated at LAC USC Medical Center at a cost of \$39,167.00. The client did not have Medi-Cal or private insurance to cover these services.

The attorney has settled the case for the amount of \$25,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 8,250.00	\$8,250.00	33.00%
Attorney Costs	1,441.57	1,441.57	5.77%
ACRC Physical Therapy	3,690.00	1,200.00	4.80%
County of Los Angeles	39,167.00	6,000.00	24.00%
McCormick Ambulance	4,342.00	1,600.00	6.40%
Radnet Radiology	4,212.00	1,000.00	4.00%
Saint Francis Medical Center	14,985.00	4,000.00	16.00%
Net to Client	N/A	1,508.43	6.03%
Total	\$76,087.57	\$25,000.00	100.00%

Our financial investigation reveals that the client is unemployed. The client is not receiving public assistance and has no other source of income or tangible assets.

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR TRANSMITTAL NO. 140C

Amount of Aid	\$82,836.15	Account Number	12868706
Amount Paid	311.15	Name	Adult Male
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		Service	
Balance Due	\$82,525.00	Date	05/17/12 – 04/23/14
Compromise			
Amount Offered	17,844.00	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$64,681.00	Туре	Inpatient/Outpatient

JUSTIFICATION

This settlement was the result of a reported injury while the client was dining at a restaurant. The client was treated at LAC USC Medical Center at a cost of \$82,836.15. The client did not have Medi-Cal or private insurance to cover these services.

The attorney has settled the case for the amount of \$60,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 20,000.00	\$20,000.00	33.33%
Attorney Cost	1,754.50	1,754.50	2.92%
County of Los Angeles	82,525.00	17,844.00	29.74%
Glendora Community Hospital	1,627.00	340.00	0.57%
Methodist Hospital of Southern California	8,745.25	1,816.00	3.03%
Net to Client	N/A	18,245.50	30.41%
Total	\$114,651.75	\$60,000.00	100.00%

Our financial investigation reveals that the client is unemployed. The client is not receiving public assistance and has no other source of income or tangible assets.

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR TRANSMITTAL NO. 140D

		Account	
Amount of Aid	\$92,283.00	Number	12992393
Amount Paid	0.00	Name	Adult Male
		Service	
Balance Due	\$92,283.00	Date	09/07/13 - 03/11/14
Compromise			
Amount Offered	8,110.00	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$84,173.00	Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus motorcycle accident. He was treated at LAC USC Medical Center at a cost of \$92,283.00. The client did not have Medi-Cal or private insurance to cover these services.

The attorney has settled the case for the amount of \$25,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 8,333.00	\$ 8,333.00	33.33%
Attorney Costs	232.76	232.76	0.93%
Alhambra Fire Department	2,264.86	228.00	0.92%
County of Los Angeles	92,283.00	8,110.00	32.44%
Net to Client	N/A	8,096.24	32.38%
Total	\$103,113.62	\$25,000.00	100.00%

Our financial investigation reveals that the client supports himself with a marginal income. The client has no other source of income or tangible assets.

COUNTY OF LOS ANGELES – TREASURER AND TAX COLLECTOR TRANSMITTAL NO. 140E

Amount of Aid	\$357,901.00	Account Number	12849789
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Amount Paid	0.00	Name	Adult Male
		Service	
Balance Due	\$357,901.00	Date	08/30/13 - 01/22/14
Compromise			
Amount Offered	18,050.57	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$339,850.43	Туре	Inpatient /Outpatient

JUSTIFICATION

The client was involved in a commuter bus versus pedestrian accident. He was treated at LAC USC Medical Center at a cost of \$357,901.00. The client did not have Medi-Cal or private insurance to cover these services.

The attorney has settled the case for the amount of \$100,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 38,207.00	\$ 38,207.00	38.21%
Attorney Cost	25,691.85	25,691.85	25.69%
CCC Surgery Center	28,030.40	13.17	0.01%
County of Los Angeles	357,901.00	18,050.57	18.05%
Dr. Chen	37,933.50	17.82	0.02%
Ronco Drug Company	225.11	0.10	0.00%
Net to Client	N/A	18,019.49	18.02%
Total	\$487,988.86	\$100,000.00	100.00%

The client's attorney hired an immigration attorney to assist with the client's immigration status and ensure the client remained in the country. The immigration attorney's fees are included in the attorney cost.

The client's attorney attempted to expunge the County's lien. Working with County Counsel, the TTC was able to negotiate this offer of settlement.